

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 3  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Spirit of Democracy America</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521211		
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name (Last, First, Middle Initial) of Payee <b>MB Public Affairs, Inc.</b>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2012		
Mailing Address 1415 L Street, Suite 1260			Amount <span style="border: 1px solid black; padding: 2px;">12500.00</span>		
City Sacramento		State CA	Zip Code 95814		
Purpose of Expenditure Professional Services		Category/ Type <span style="border: 1px solid black; padding: 2px;">24E</span>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 08	
Name of Federal Candidate Supported or Opposed by Expenditure: Paul Cook				Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">229429.74</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
Full Name (Last, First, Middle Initial) of Payee <b>McNally Temple Associates, Inc.</b>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 06 / 2012		
Mailing Address 1817 Capitol Avenue			Amount <span style="border: 1px solid black; padding: 2px;">27815.55</span>		
City Sacramento		State CA	Zip Code 95811		
Purpose of Expenditure Campaign Literature and Mailings		Category/ Type <span style="border: 1px solid black; padding: 2px;">24E</span>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 08	
Name of Federal Candidate Supported or Opposed by Expenditure: Paul Cook				Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">229429.74</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;">40315.55</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Thomas W. Hiltachk</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 08 / 2012</p>					

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 2 OF 3  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Spirit of Democracy America</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521211	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>McNally Temple Associates, Inc.</b>			Date MM / DD / YYYY <b>10 / 06 / 2012</b>	
Mailing Address 1817 Capitol Avenue			Amount <b>2925.00</b>	
City Sacramento	State CA	Zip Code 95811	Transaction ID : EDT.E.35	
Purpose of Expenditure Campaign Consultants		Category/ Type <b>24E</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>CA</b> District: <b>08</b>	
Name of Federal Candidate Supported or Opposed by Expenditure: Paul Cook			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>229429.74</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>McNally Temple Associates, Inc.</b>			Date MM / DD / YYYY <b>10 / 06 / 2012</b>	
Mailing Address 1817 Capitol Avenue			Amount <b>2925.00</b>	
City Sacramento	State CA	Zip Code 95811	Transaction ID : EDT.E.37	
Purpose of Expenditure Campaign Consultants		Category/ Type <b>24E</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>CA</b> District: <b>08</b>	
Name of Federal Candidate Supported or Opposed by Expenditure: Paul Cook			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>229429.74</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>5850.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Thomas W. Hiltachk

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 08 / 2012**

Signature

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 3 OF 3  
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NAME OF COMMITTEE (In Full) <b>Spirit of Democracy America</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521211	
Check If <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>Voter/Consumer Research, Inc.</b>		Date MM / DD / YYYY <b>10 / 06 / 2012</b>	
Mailing Address <b>501 C Street, NE</b>		Amount <b>19750.00</b>	
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20002</b>	Transaction ID : <b>EDT.E.41</b>
Purpose of Expenditure <b>Polling and Survey Research</b>	Category/Type <b>24E</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <b>CA</b> District: <b>08</b>
Name of Federal Candidate Supported or Opposed by Expenditure: <b>Paul Cook</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>229429.74</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>19750.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	<b>65915.55</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Thomas W. Hiltachk

[Electronically Filed]

Date

MM / DD / YYYY  
**10 / 08 / 2012**

Signature